## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number

(Column 1) (Column 2)								TYPE			OTHER THAN OR SMALL ENTITY		
1 T/	OTAL CLAIMS		· (Column	<u>=1)</u>	100in	mn 2)	1.			OR 7		<del>,</del>	
L	)IAL CLAIMS			<del>,</del> !	ļ			RATE	FEE	4	RATE	FEE	
FC	OR .	NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FEE	395.00	OR	BASIC FEE	790.00		
тс	OTAL CHARGEA	ABLE, CLAIMS	mir	minus 20= *		•		X\$ 25	<u> </u>	OR	·X501=-		
!	DEPENDENT C		<u></u>	aninus 3 =		•		X kg=		OR	X <b>2</b> 0)=		
Mi	JUTIPLE DEFEN	NDENT CLAIM P	RESENT	RESENT		· [] .		+150=		OR	+300=	7-7-	
* If	the difference	in column 1 is	less than zo	less than zero, enter "0" in column 2			L	TOTAL	·	OR	TOTAL		
	C	LAIMS AS A	AMENDEL	MENDED - PART II				•			OTHER	THAN	
		(Column 1)		(Column 2) (Column 3)			)	SMALLE	ENTITY	OR	SMALL		
AMENDMENTA	PL 15/04	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
YOME	Total	. 21	Minus	- 2	2	=		X25'=		OR	X\$50=		
ME	Independent	. 4	Minus	,L	1	=	] [	X120:		OR	X200=	/	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+150=	7	OR	+360=/	<del></del>	
								TOTAL		1	TOTAL ADDIT, FEE		
r		(Column 1)		(Colum	~~ 01	(Column 3)		OOM, FEE L			WON. I LLE		
		CLAIMS	T	HIGH	EST .		7 [		-IDDA			ADDI-	
ENT B		REMAINING AFTER AMENDMENT		PAID F	DUSLY	PRESENT EXTRA		FATE,	TIONAL FEE		RATE	TIONAL	
AMENORIENT	Total	1	Minus	2.4		=		*x35 =		OR	XSS0=		
ME	Independent	*	Minus	<b>\$44</b>		=	li	X 100=		OR	X200=		
ك	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM	<u>پنا</u>					220		
				•	•	<u>.</u>	L	+150=		OR	+300=		
							IA	DOIT, FEE		OR ,	TOTAL ADDIT. FEEL	<u> </u>	
		(Column 1)		(Colum	กก 2)	(Column 3)		-					
ENT C		CLAIMS FIEMAINING AFTER - AMENOMENT		HIGHE NUMB PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA			ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	##		=		X25'=		OR	X\$50 =	<u>.:</u>	
YME!	Independent	•	Minus	. ***		=		×100 =		OR	X200:	•	
لا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+150=		OR	+300=		
		mn 1 is less than th					_ L_	TOTAL		OG L	TOTAL		
	If the "Highest Nun	mber Previously Pa	aid For IN THIS	S SPACE is	less than	n 20. enter "20."	· AC	OOT. FEE		OR A	DOTT. FEE		
***	****If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter ***  The 'Highest Number Previously Paid For' (Total or Independent) is the highest norm en Journal in the appropriate box in optumn 1												